

OAHU CANDIDATES:  
SUBMIT 1 ORIGINAL AND 1 COPY  
NEIGHBOR ISLAND CANDIDATES:  
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT  
CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

MARK STEVEN MOSES

(b) Committee Name: FRIENDS OF MARK MOSES

(c) Mailing Address: 92-339 AKAUUA STREET

KAPOLEI, HI 96706-8550

(d) Phone (Bus) 672-8550 (Res) 672-8550

Treasurer's

SECTION II-TYPE OF REPORT

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary ☐ Amended  
99 JUL 30 10:35

☐ 2nd Preliminary Primary ☐ Short Form

☐ Final Primary

☐ Preliminary General

☐ Final Election Period

☒ Supplemental

REPORTING PERIOD

1/1/99 through 6/30/99

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS  
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD <sup>2</sup> TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period <sup>2</sup> (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee).....		1,117.12
2. Cash on Hand at the Beginning of this Reporting Period.....	1,323.05	
3. Total Receipts with Loans (From Line 17, Column A and B).....	8,070.89	12,205.34
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	9,393.94	13,322.46
5. Total Disbursements (From Line 21, Column A and B).....	8,408.49	12,337.01
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	985.45	985.45
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Beginning of this Reporting Period.....	0	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....	0	
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....	0	
8. Total of Loans at the Closing of this Reporting Period (Schedule E, Line 10).....	1,160.34	
9. Debts Owed BY the Candidate Committee at the Closing of this Reporting Period (Add Lines 7(c) and 8).....	1,160.34	
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....	0	
11. Subtotal (Add Lines 9 and 10).....	0	
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	<174.89>	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Mark Moses 7/27/99  
Candidate Signature Date

Mark Moses 7/27/99  
Treasurer Signature Date

<sup>1</sup> Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and received no contributions, made no expenditures, and had a deficit or surplus of \$2,000 or less for the reporting period. Short form reporting requires completion of only Section I, Section II, and Section III (Part 1) of this Disclosure Report.  
<sup>2</sup> An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

Form CC-5 (Rev. 11/97)

**SECTION III (Part) DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through H Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
<b>13. Contributions From:</b>		
(a) Individuals/Other Entities/Noncandidate Committees		
(i) Monetary Contributions of \$100 or Less.....	3,595.00	3,595.00
(ii) Non-Monetary Contributions of \$100 or Less.....	Ø	Ø
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....	1,450.00	1,450.00
(iv) Total Contributions from Individuals/Other Entities/Noncandidate Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B).....	5,045.00	5,045.00
(b) Political Parties		
(i) Monetary Contributions of \$100 or Less.....	Ø	Ø
(ii) Non-Monetary Contributions of \$100 or Less.....	Ø	Ø
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule G, Line 2 for Column A).....	Ø	Ø
(iv) Total Contributions from Political Parties (Add Lines (b)(i) through (b)(iii) for Columns A and B).....	Ø	Ø
(c) Candidate or Candidate's Immediate Family		
(i) Monetary Contributions of \$100 or Less.....	Ø	Ø
(ii) Non-Monetary Contributions of \$100 or Less.....	Ø	Ø
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule D, Line 2 for Column A).....	Ø	Ø
(iv) Total Contributions from Candidate or Candidate's Immediate Family (Add Lines (c)(i) through (c)(iii) for Columns A and B).....	Ø	0
(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns A and B).....	5,045.00	7,545.00
<b>14. Public Funds and Other Receipts (Schedule C, Line 2 for Column A).....</b>	Ø	Ø
<b>15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B).....</b>	5,045.00	7,545.00
<b>16. Loans From:</b>		
(a) Candidate or Candidate's Immediate Family (Schedule E, Line 1 for Column A).....	3,025.89	4,660.34
(b) Financial Institutions (Schedule E, Line 4 for Column A).....	Ø	Ø
(c) Other Sources (Schedule E, Line 7 for Column A).....	Ø	Ø
(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B).....	3,025.89	4,660.34
<b>17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B).....</b>	8,070.89	12,205.34
<b>DISBURSEMENTS</b>		
<b>18. Expenditures (Schedule B, Line 3 for Column A).....</b>	4,908.49	8,311.01
<b>19. Fundraising Expenditures (Schedule F, Line 3 for Column A).....</b>	Ø	Ø
<b>20. Loans Repaid or Forgiven:</b>		
(a) Candidate or Candidate's Immediate Family (Schedule E, Line 2 for Column A).....	3,500.00	4,026.00
(b) Financial Institutions (Schedule E, Line 5 for Column A).....	Ø	Ø
(c) Other Sources (Schedule E, Line 8 for Column A).....	Ø	Ø
(d) Total Loans Repaid or Forgiven (Add Lines 20(a) through 20(c) for Columns A and B).....	3,500.00	4,026.00
<b>21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B).....</b>	8,408.49	12,337.01
<b>22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for     Column A) (Net Change This Period).....</b>	Ø	
<b>23. Total Disbursements (Add Lines 21 and 22 for Columns A and B).....</b>	8,408.49	12,337.01

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
CANDIDATE COMMITTEE**

REMINDEE: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	*REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION (IF INDIVIDUAL)		
2/27/99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Linda Smith 2650 Pacific Heights RD Honolulu, HI 96813		150.00	150.00
3/2/99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION Makai Village partnership 1001 Bishop street Honolulu, HI 96813		500.00	500.00
3/17/99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION David A. Heenan 900 Fort street mall #1450 Honolulu, HI 96813-3715		600.00	600.00
3/31/99	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION UHPA 1017 Palm Drive Honolulu, HI 96814		200.00	200.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (THIS PAGE)..... \$1,450.00

2. TOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A)..... \$1,450.00

Form CC-3(A) (Rev. 11/97)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

OF

MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
1/1/99	Voicestream Wireless P.O. Box 78922 Phoenix, AZ 85062-8922	Campaign phone	0 \$167.26
1/5/99	Postal connection 92-590 Farrington Hwy Kapolei, HI 96707	Fundraiser Buk mail stamp	\$19.79
1/15/99	Aiea Pearl City Business Association		\$13.00
1/30/99	St Andrews Priory School 224 Queen Emma Square Honolulu, HI 96813	Fundraiser	0 \$100.00
1/29/99	Voicestream Wireless P.O. Box 78922 Phoenix, AZ 85062-8922	campaign phone	\$138.51
1/31/99	John Atchison 91-1045 Lehulehu street Kapolei, HI 96707	sam's club membership	0 \$20.00
2/5/99	Hawaii Hocky, LTD 917 Kokea street Honolulu, HI 96817-043	Fundraiser	0 \$108.33

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... \$ 567.49
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

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OF

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MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
2/16/99	Hawaii Newspaper Agency, Inc P.O. Box 31000 Honolulu, HI 96849-502	Fundraiser Newspaper ad.	\$844.90
2/17/99	Kinko's 1050 Bishop street Honolulu, HI 96813	Fundraiser	\$54.95
2/17/99	U.S. postmaster main office window Honolulu, HI 96820	Fundraiser	\$353.82
2/18/99	U.S. postmaster main office window Honolulu, HI 96820	Fundraiser	\$70.41
2/18/99	Kinko's 1050 Bishop street Honolulu, HI 96813	Fundraiser	\$68.75
2/19/99	U.S. postmaster main office window Honolulu, HI 96820	Fundraiser	\$297.02
2/22/99	U.S. postmaster main office window Honolulu, HI 96820	Fundraiser	\$119.39

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE).....

\$1,809.24

2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H,  
LINE 4).....

3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT,  
SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

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OF

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MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
2/22/99	Kinko's 1000 Kam Hwy Pearl city, HI 96782	Fundraiser	\$12.09
2/22/99	GTE Hawaiian Tel P.O. Box 2200 Honolulu, HI 96841	campaign phone	\$124.99
2/22/99	U.S. postmaster Pearl city, HI 96782-9998	Fundraiser	\$66.00
2/23/99	Sam's club 1000 Kam Hwy, suite 100 Pearl city, HI 96782	Fundraiser	\$82.21
2/24/99	Costco 4830 Lawehana street Honolulu, HI 96818	Fundraiser	\$11.99
2/24/99	Sam's club 1000 Kam Hwy, suite 100 Pearl city, HI 96782	Fundraiser	\$34.35
2/24/99	Martin Kanakaole 1210 Kamaile St #304 Honolulu, HI 96814	Fundraiser	\$50.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE).....

\$381.63

2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....

3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

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OF

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MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
2/24/99	GTE Hawaiian Tel P. O. Box 2200 Honolulu, HI 96841	Campaign phone	\$31.98
2/27/99	Navy Exchang Barber point, HI 96862	Fundraiser	\$12.89
2/28/99	Voicestream Wireless P. O. Box 7892 Phoenix, AZ 85062-8922	Campaign phone	\$136.71
3/1/99	Navy Exchang Barber point, HI 96862	Fundraiser	\$25.76
3/4/99	Evelyn E. Souza 92-848 Palailai street Kapolei, HI 96707	Fundraiser (Food)	\$350.00
3/23/99	Hawaii Newspaper Agency, INC P. O. BOX 31000 Honolulu, HI 96849-5027	Fundraiser Newspaper ad	\$42.12
3/23/99	Voicestream Wireless P. O. Box 78922 Phoenix, AZ 85062-8922	Campaign phone	\$52.92

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... \$652.38
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 5

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
3/23/99	GTE Hawaiian Tel P. O. Box 2200 Honolulu, HI 96841	Campaign phone	\$29.92
3/26/99	John Atehison 91-1045 Lehulehu street Kapolei, HI 96707	Fundraiser	\$618.85
4/17/99	Bank of Hawaii Kapolei 92-590 Farrington Hwy Kapolei, HI 96707	Check order	\$10.70
4/13/99	U.S. Postmaster main office window Honolulu, HI 96820		\$632.77
4/15/99	U.S. Postmaster 1001 Kamokila Blvd, suite 112 Kapolei, HI 96707	Fundraiser Thank you Letters mailing	\$37.20
4/15/99	U.S. Postmaster 1001 Kamokila Blvd, suite 112 Kapolei, HI 96707	Fundraiser Thank you Letters mailing	\$67.00
4/20/99	postal connection 92-590 Farrington Hwy suite 210 Kapolei, HI 96707	Bulk mail stamp	\$19.95

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... **\$1,416.39**
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

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OF

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MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
5/10/99	GTE Hawaiian Tel P.O. Box 2200 Honolulu, HI 96841	Campaign phone	\$29.68
6/22/99	GTE Hawaiian Tel P.O. Box 2200 Honolulu, HI 96841	Campaign phone	\$34.18
1/1/99- 6/30/99	Bank of Hawaii Kapolei 92-590 Farrington Hwy Kapolei, HI 96707	Bank service charges	\$17.50

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... \$81.36
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A)..... \$4,908.49

Form CC-5(B) (Rev. 11/97)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE C  
PUBLIC FUNDS AND OTHER RECEIPTS (Interest, Refunds, Etc.)  
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE

OF

MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF RECEIPT AND DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE

1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS (Interest, Refunds, Etc.) THIS PERIOD (THIS PAGE).....

2. TOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS (Interest, Refunds, Etc.) THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL  
ON FORM CC-5, SECTION III (PART 2), LINE 14, COLUMN A).....

Form CC-5(C) (7/95)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE D

CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY MEMBER	NAME OF EMPLOYER (IF IMMEDIATE FAMILY MEMBER)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF IMMEDIATE FAMILY MEMBER)	OCCUPATION (IF IMMEDIATE FAMILY MEMBER)		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (c)(iii), COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE E  
LOANS  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

MARK STEVEN MOSES FRIENDS OF MARK MOSES

**LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
		\$1,634.45	\$3,025.89	\$3,500.00	\$1,160.34

1. TOTAL OF LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 16(a), COLUMN A)..... **\$3,025.89**
2. TOTAL OF LOANS REPAID OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(a), COLUMN A)..... **\$3,500.00**
3. TOTAL OF LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY AT THE CLOSING OF THIS REPORTING PERIOD..... **\$1,160.34**

**LOANS FROM FINANCIAL INSTITUTIONS**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF FINANCIAL INSTITUTION	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD

4. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 16(b), COLUMN A).....
5. TOTAL OF LOANS REPAID OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(b), COLUMN A).....
6. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS AT THE CLOSING OF THIS REPORTING PERIOD..... **0**

**LOANS FROM OTHER SOURCES**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF SOURCE OF OTHER LOAN	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD

7. TOTAL OF LOANS FROM OTHER SOURCES THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 16(c), COLUMN A).....
8. TOTAL OF LOANS REPAID OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(c), COLUMN A).....
9. TOTAL OF LOANS FROM OTHER SOURCES AT THE CLOSING OF THIS REPORTING PERIOD.....
10. TOTAL OF LOANS AT THE CLOSING OF THIS REPORTING PERIOD (ADD LINES 3, 6 AND 9 AND ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 1), LINE 8)..... **\$1,160.34**

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE F  
FUNDRAISING EXPENDITURES  
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE

OF

MARK STEVEN MOSES FRIENDS OF MARK MOSES

DATE OF FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF FUNDRAISING EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID FUNDRAISING EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD

- . SUBTOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (THIS PAGE).....
- . TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 5).....
- . TOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION II (PART 2), LINE 19, COLUMN A).....

Form CC-5(F) (7/95)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE G

POLITICAL PARTY COMMITTEES

AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100

CANDIDATE COMMITTEE

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE

OF

MARK STOKEN MOSES FRIENDS OF MARK MOSES

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF POLITICAL PARTY COMMITTEE	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (b)(iii), COLUMN A).....

Form CC-5(G) (7/95)